

County: St. Croix
LUTHERAN HOME: RIVER FALLS
640 NORTH MAIN

Facility ID: 7590

Page 1

RIVER FALLS 54022 Phone:(715) 425-5353
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/02): 80
Total Licensed Bed Capacity (12/31/02): 117
Number of Residents on 12/31/02: 60

Ownership: Non-Profit Corporation
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 67

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		28.3
Supp. Home Care-Personal Care	Yes	-----	-----	-----	-----	1 - 4 Years		35.0
Supp. Home Care-Household Services	Yes	Developmental Disabilities	1.7	Under 65	10.0	More Than 4 Years		36.7
Day Services	No	Mental Illness (Org./Psy)	38.3	65 - 74	1.7			-----
Respite Care	Yes	Mental Illness (Other)	1.7	75 - 84	20.0			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	60.0	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.7	95 & Over	8.3	Full-Time Equivalent		
Congregate Meals	No	Cancer	5.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	1.7		100.0	(12/31/02)		
Other Meals	No	Cardiovascular	1.7	65 & Over	90.0	-----		
Transportation	No	Cerebrovascular	13.3		-----	RNs		10.0
Referral Service	No	Diabetes	15.0	Sex	%	LPNs		13.5
Other Services	Yes	Respiratory	8.3	-----	-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	11.7	Male	28.3	Aides, & Orderlies		
Mentally Ill	No		-----	Female	71.7			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care					
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	0	0.0	0	36	81.8	119	0	0.0	0	16	100.0	143	0	0.0	0	0	0.0	0	52	86.7
Intermediate	---	---	---	7	15.9	97	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	7	11.7
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	1	2.3	155	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.7
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		44	100.0		0	0.0		16	100.0		0	0.0		0	0.0		60	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02								

Percent Admissions from:		Activities of		%	% Needing Assistance of		% Totally	Total		
		Daily Living (ADL)		Independent	One Or Two Staff		Dependent	Number of Residents		
Private Home/No Home Health		18.0	Bathing		0.0	71.7		28.3	60	
Private Home/With Home Health		3.3	Dressing		8.3	65.0		26.7	60	
Other Nursing Homes		4.9	Transferring		26.7	50.0		23.3	60	
Acute Care Hospitals		68.9	Toilet Use		20.0	55.0		25.0	60	
Psych. Hosp.-MR/DD Facilities		3.3	Eating		35.0	53.3		11.7	60	
Rehabilitation Hospitals		0.0								60
Other Locations		1.6	*****							
Total Number of Admissions		61	Continence			% Special Treatments			%	
Percent Discharges To:			Indwelling Or External Catheter		5.0	Receiving Respiratory Care		6.7		
Private Home/No Home Health		29.6	Occ/Freq. Incontinent of Bladder		61.7	Receiving Tracheostomy Care		0.0		
Private Home/With Home Health		4.2	Occ/Freq. Incontinent of Bowel		26.7	Receiving Suctioning		0.0		
Other Nursing Homes		2.8				Receiving Ostomy Care		1.7		
Acute Care Hospitals		14.1	Mobility			Receiving Tube Feeding		0.0		
Psych. Hosp.-MR/DD Facilities		0.0	Physically Restrained		0.0	Receiving Mechanically Altered Diets		23.3		
Rehabilitation Hospitals		0.0								
Other Locations		5.6	Skin Care			Other Resident Characteristics				
Deaths		43.7	With Pressure Sores		5.0	Have Advance Directives		83.3		
Total Number of Discharges			With Rashes		1.7	Medications				
(Including Deaths)		71				Receiving Psychoactive Drugs		63.3		

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities										

		This Facility	Ownership:		Bed Size:		Licensure:		All	
		%	Nonprofit Peer Group		100-199 Peer Group		Skilled Peer Group		Facilities	
			%	Ratio	%	Ratio	%	Ratio	% Ratio	
Occupancy Rate: Average Daily Census/Licensed Beds		56.5	87.5	0.65	85.7	0.66	85.3	0.66	85.1 0.66	
Current Residents from In-County		36.7	79.3	0.46	81.9	0.45	81.5	0.45	76.6 0.48	
Admissions from In-County, Still Residing		16.4	21.8	0.75	20.1	0.82	20.4	0.80	20.3 0.81	
Admissions/Average Daily Census		91.0	124.6	0.73	162.5	0.56	146.1	0.62	133.4 0.68	
Discharges/Average Daily Census		106.0	129.0	0.82	161.6	0.66	147.5	0.72	135.3 0.78	
Discharges To Private Residence/Average Daily Census		35.8	50.5	0.71	70.3	0.51	63.3	0.57	56.6 0.63	
Residents Receiving Skilled Care		86.7	94.7	0.91	93.4	0.93	92.4	0.94	86.3 1.00	
Residents Aged 65 and Older		90.0	96.2	0.94	91.9	0.98	92.0	0.98	87.7 1.03	
Title 19 (Medicaid) Funded Residents		73.3	56.7	1.29	63.8	1.15	63.6	1.15	67.5 1.09	
Private Pay Funded Residents		26.7	32.8	0.81	22.1	1.20	24.0	1.11	21.0 1.27	
Developmentally Disabled Residents		1.7	0.5	3.12	0.9	1.82	1.2	1.41	7.1 0.23	
Mentally Ill Residents		40.0	35.5	1.13	37.0	1.08	36.2	1.11	33.3 1.20	
General Medical Service Residents		11.7	23.8	0.49	21.0	0.55	22.5	0.52	20.5 0.57	
Impaired ADL (Mean)		53.0	50.4	1.05	49.2	1.08	49.3	1.08	49.3 1.08	
Psychological Problems		63.3	54.7	1.16	53.2	1.19	54.7	1.16	54.0 1.17	
Nursing Care Required (Mean)		4.8	6.9	0.69	6.9	0.69	6.7	0.71	7.2 0.67	